## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
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466	hav						
YOUNG & T. 209 Madison So Suite 500 Alexandria, VA	Sta add						
mozanara, v	22314						(Depositor's name)
							(Signature)
					_		(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/552,657 12/21/2006			Joachim Bangert		4001-1207 2739		2739
TITLE OF INVENTION	N: COMPONENT WITH	A LOGIC CIRCUIT AR	RANGEMENT WITH CO	NFIGURABLE FU	JNCTIO	ONALITY	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0		\$1810	04/04/2011
EXAN	EXAMINER		CLASS-SUBCLASS				
LUU, PHO M		2824	365-148000				
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>			or agents OR, alternative (2) the name of a single registered attorney or a	f up to 3 registered patent attorneys ternatively, a single firm (having as a member a ley or agent) and the names of up to ent attorneys or agents. If no name is will be printed.			
PLEASE NOTE: Un recordation as set fort (A) NAME OF ASSI	less an assignee is identi h in 37 CFR 3.11. Comp	ified below, no assignee eletion of this form is NO	(B) RESIDENCE: (CITY	atent. If an assigners			cument has been filed for
Please check the appropr	iate assignee category or	categories (will not be pri	inted on the patent):	Individual 🛛 Co	rporatio	on or other private grou	p entity Government
4a. The following fee(s)  Signature  Signature  Signature  Publication Fee (N  Advance Order - 4	To small entity discount p	ermitted)	<ul> <li>4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)</li> <li>A check is enclosed.</li> <li>Payment by credit card. Form PTO-2038 is attached.</li> <li>The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 250120 (enclose an extra copy of this form).</li> </ul>				
a. Applicant claim	tus (from status indicated s SMALL ENTITY statu	above) s. See 37 CFR 1.27.	☐ b. Applicant is no long	(if er claiming SMAL	nec LENT	cessary) ITY status. See 37 CFF	R I.27(g)(2).
NOTE: The Issue Fee and interest as shown by the i	d Publication Fee (if requerecords of the United Stat	ired) will not be accepted es Patent and Trademark	from anyone other than the Office.	e applicant; a regis	tered at	torney or agent; or the	assignee or other party in
Authorized Signature	Benoît	Castel		Date Marc	ch 2	1, 2011	
Typed or printed name <u>Benoit Castel</u>			Registration No. 35,041				
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